

I. Center Identification

Organization Name: SURGERY CENTER OF INDIANAPOLIS THE

Street Address: 2007 N. Capitol Ave

City: Indianapolis

County: Marion

ASC Web Address: the surgery center of carmel-indy.com

Fiscal Year: 2012

Accredited: Yes No

Name of Accrediting Body: AAAHC

Corporate Tax Status:

For Profit

Non Profit

II. Identification of Surgical Resources

| Number of operating rooms | 4 |
|---------------------------|---|
| Number of procedure rooms | |

III. Utilization Statistics

| A. Total Patients and Procedures | | | | |
|---|-----------------------|-------------------------|--|--|
| Time Period | Number of Patients | Number of Procedures | | |
| Persons Served in twelve-month period | 951 | 2445 | | |
| B. Ten Most Frequent Surgical Procedures Performed | | | | |
| CPT Code | | Total Procedures | | |
| 28285 | | 232 | | |
| 69436 | | 117 | | |
| 15820 | 91 | | | |
| 30140 | | 83 | | |
| 15822 | | 79 | | |
| 28308 | | 79 | | |
| 30520 | | 68 | | |
| | | 1 | | |

| 15879 | 65 |
|-------|----|
| 42820 | 64 |
| 28270 | 56 |

IV. Outcomes from Surgical Procedures

| Number of patients with a Post-Surgical wound infection within 30 days following a surgical | 3 |
|---|---|
| encounter. | |